BOROUGH OF CHESTERFIELD.



With the Compliments of the School Medical Officer of Health.



Education (Administrative Provisions) Act, 1907.



ANNUAL REPORT

ON THE

Medical Inspection of School Children

Jan. 1st to Dec. 31st, 1917,

FOR THE

Borough of Chesterfield.



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Chestertield Education Committee.

MEDICAL INSPECTION DEPARTMENT.

March, 1918.

MR. CHAIRMAN, MRS. CARRUTHERS AND GENTLEMEN,

In the absence of your School Medical Officer, Dr. Fraser, who joined His Majesty's Forces in June, 1917. I beg to submit the Annual Report on the Medical Inspection of School Children in the Borough for the year ending Dec. 31st, 1917.

On the suggestion of the Board of Education the Report has been made as brief as possible, and has been framed generally on the lines laid down in the Board's Circular 935.

It is satisfactory to note that the Committee has decided to appoint a School Nurse, and is negotiating with the County for the part time services of their Dental Staff for the Borough children between six and eight years of age. Already, by arrangement, the County Oculist treats children with defective vision sent to him by your Medical Officer, and similarly X-Ray treatment is provided for Ringworm cases.

In conclusion, I have to express my thanks to the Education Committee, the Secretary of the Education Committee, the teachers, the School Attendance Officers, and the Assistant at Inspections for the valuable co-operation and help given.

I am,

Your obedient Servant,

R. W. JAMESON.

SUMMARY OF WORK DONE DURING 1917.

No. of Children examined in School Routine Inspection	1135
No. of Special Cases examined in School Routine Inspection	. 357
No. of Re-inspections of Children previously found defective	835
No. of Cases attending School Clinic	1244
No. of Attendances at School Clinic	2972
No. of Ringworm Cases treated by X-Rays	20
No. of School Notifications from Teachers and Attendance Officers	73
No. of Visits by Health Visitors to Minor Infectious Diseases	390
No. of Cases visited by Members of Civic Guild	226
No. of Attendances at "Settlement" School for Invalid Children	1220

BOROUGH OF CHESTERFIELD.

Population (estimated civil)	36706
Area	2643 acres
Rateable Value	£146137
Education Rate	$1/4\frac{1}{2}$
No. of Schools	14
Accommodation	7048
Number on Rolls	6622
Average Attendance	5815.6

The reason for the somewhat reduced numbers is owing to the fact that in the first half of 1917 Dr. Fraser, from illness and other causes, was unable to devote as much time to school work as in the corresponding period of 1916.

EDUCATION COMMITTEE.

Chairman—Ald. G. EASTWOOD, J.P. Deputy-Chairman—Ald. G. BOOTH, M.D., J.P.

Alderman RHODES,

,, SHENTALL,

Councillor CLAYTON,

" DRONFIELD,

,, GIBBONS,

,, GLOSSOP,

,, LANCASTER,

,, RANDALL,

,, CROPPER,

,, ADAMS,

Mrs. CARRUTHERS,
JAMES MANSELL, Esq., M.A.,
W. MURPHY, Esq.,

S. H. HARRISON, Esq.

MEDICAL INSPECTION STAFF.

Medical Officer—R. FRASER, M.B., Ch.B., D.P.H.

Temp. Medical Officer—
R. W. JAMESON, M.R.C.S., L.R.C.P., D.P.H.

Assistant at Inspection and Clerk—Miss W. BEARDSLEY.

GENERAL ARRANGEMENTS.

The routine medical inspection of entrannts, leavers, and intermediate (8-9 years) group was continued throughout the year, save that in the late autumn, at an inspection of all ages, a selection of special cases by the Medical Officer was substituted. The general arrangements have been similar to those of previous years. The total number of children examined (groups 1-3) was 1135.

TABLE I.—NUMBER OF CHILDREN INSPECTED

1st January, 1917, to 31st December, 1917.

A. "CODE" GROUPS.

	Entrants.	Inter- nediate Leavers. Group.	
Age.	3 4 5 6 Other Total.	8 12 13 14 Other Total.	Grand Total.
Boys	1 22 5 9 36 5 4 172	175 145 27 59 407	579
Girls	1 20 54 29 39 143	160 133 37 2 81 413	556
Totals	2 42 113 65 93 315	3 35	1135

B. GROUPS OTHER THAN CODE."

	Intermediate Group (other than 8 years)		Re-examinations (i e. No. of Children re-examined).
Boys .	•••	148	394
Girls	•••	209	444
		357	838

TABLE II.—RETURN OF DEFECTS FOUND IN THE COURSE OF MEDICAL INSPECTION IN 1917.

			Code (GROUPS.	Spec	CIALS.
DI	EFECT OR DISEASE.		Number referred for Treatment.	Number requiring to be kept under observation, but not referred for Tr'tmt	Number referred for Treatment.	Number requiring to be kept under observation, but not referred for tr'tmt.
		• •	7	7	16	1
	Uncleanliness: Head		50	1	28	7
	Rody	• •	12	1	8	4
	Ringworm:	•	12	1		1
	Hand				3	
	Body	• •	• • •			•••
Skin	Scabies .	•	7		1	
	Impotigo				4	
	Other Disease .		1		2	• • •
EYE	(Defective Vison and Squint.		158	1	118	29
EIR			9		7	• • •
EAR			4	2 2	18	1 3
	(Ear Disease .		1	2	31	3
Теетн-	Dental Disease (see N.B. (2)					
			109	5	23	8
Nose		$\cdot \cdot $	33	6	21	
and		• •	18	1	14	1
THROAT	Enlarged Tonsils & Adenoid	S	13	11	37	13
II	Defective Speech .	• •	2	L	4	5
	Heart Disease:		9	7		
and		••	3	$egin{array}{cccccccccccccccccccccccccccccccccccc$	• • •	• • •
CIRCULA-	Anomia	• •	9	1	5	1
TION	(Pulmonary Tuberculosis:	-	9	• • •	9	1.
	Definite		$_2$	2	3	
Lungs	Supported			$\frac{2}{2}$		6
Donas	Chronia Dromobitio		3		1	
	Other Discore					
NI	(Enilance			• • •	2	2
NERVOUS System	Chorea		1	1		
SYSTEM	Other Disease		1	1	1	
	Non-pulmonary Tuberculosis	S				
	Glands			* * *	• • •	
	Bones and Joints		• • •	•••	1	
	Other Forms		• • •	• • • •		
	Rickets	•		3	$\frac{1}{c}$	
	Deformities				6	2
	Other Defects or Diseases		9	4	4	17
			452	72	351	100
			104	14	001	100
	V. Tarana and Anna an	-				

TABLE III.

NUMERICAL RETURN OF ALL EXCEPTIONAL

CHILDREN IN THE AREA IN 1917.

			Boys.	Girls.	Total.
	nd partially nd).	Attending Public Elementary Schools Attending Certified Schools for the Blind Not at School	1	1	2
Deaf and (including Dea	g partially	Attending Public Elementary Schools Attending Certified Schools for the Deaf Not at School	17 1	12	29
Mentally	Feeble Minded	Attending Public Elementary Schools Attending Certified Schools for Mentally Defective Children Notified to the Local (Confrol) Authority during the Year Not at School	13 1 4	2	15 1 6
Deficient	lmbeciles Idiots	At School	1	2	1
Epile		Attending Public Elementary Schools Attending Certified Schools for Epileptics	1 3	1 6	1 9
	Pulmon- ary Tuber- culosis	Attending Public Elementary Schools Attending Certified Schools for Physically Defective Children Not at School	2	16	6 29
Physically Defective	Other forms of Tuber-culosis	Attending Public Elementary Schools Attending Certified Schools for Physically Defective Children Not at School	4	6	1 10
	Cripples other than Tuber- cular	Attending Public Elementary Schools Attending Certified Schools for Physically Defective Children Not at School	1	1	2
*Dull or	Backward	Retarded 2 years }	30	31	61

^{*} Judged according to age and standard.

(27 children were excluded for more than 3 months on account of other forms of ill-health.

TABLE V.

INSPECTION, TREATMENT, &c., OF CHILDREN
DURING 1917.

(1) The total num dren medica (whether C special or aili	lly inspected ode Group, 1492
(other than undefective clongear) who makept under	from defects ncleanness or thing or foot- equire to be observation referred for
treatment (e	of children in e referred for excluding undefective cloth-
for one or (excluding	of children in ved treatment more defects uncleanliness, thing, etc

TABLE IV.—TREATMEET OF DEFECTS OF CHILDREN DURING 1917.

	No. of defects found for which Treatment was considered necessary.	cts found fo s considered	r which necessary.	No. c defects	No of	Resi	Results of Treatment.	tment.	No. of defects	Per- centage of
Condition.	From previous year.	New.	Total.	wnich no report is available.	delects treated.	Remedied.	Improved.	Unchanged.	not treated.	defects treated.
Clothing	Ø1	40	42	#	11	9	ಣ	83	27	26.1
Footgear	∞	51	59	16	24	13	00	က	19	30.6
Cleanliness of Head	19	78	97	16	69	45	ග	15	12	71.8
Cleanliness of Body	ତୀ	20	63	ಣ	17	0	9	ಣ	87	77.2
Nutrition	ಣ	23	56	ಣ	17	2	<u></u>	П	9	65.3
Nose and Throat	27	136	163	22	80	75	10	4	49	54.6
External Eye Disease	4	16	20	ಣ	15	11	4	•	<i>S</i>)	75.0
ise	12	32	44	0)	8	20	17	П	4	86.3
Teeth	110	132	242	35	184	127	22	35	23	76.03
Heart and Circulation	#	17	21	57	16	0	9		•	94.1
Lungs	•	6	6	#	ಣ	જ	-	•	8)	83.3 83.3
Nervous System	ಣ	ro	∞	8)	ಣ	જા	,— <u>i</u>	•	ಣ	37.5
Skin	•	18	18	<i>ல</i>	16	9	O		•	88.8
Rickets	•	Н	-	:	П	:	Н	•	:	100.
Deformities	:	9	9	П	גא		જા	ବା	:	83.03
Tuberculosis—non-										
compulsory	•	<u></u>	Н	:	•	:		•	—	•
Speech	H	9		67	ъ	ಣ	:	67	:	71.4
Mental Condition	4	∞	12	Н	Н	1 sent to M	M. D. Home	•	10	& &
Vision and Squint	118	276	394	85	268	232	26	10	41	68.02
Hearing	ಣ	22	25	4	14	1-	7	•	L-0	56.
Miscellaneous	ಣ	ro	∞	•	∞	9	87	•	•	100.
Total	323	905	225	213	804	581	143	80	208	9.29

PERCENTAGE OF DEFECTS FOUND AMONGST THE 1135 CHILDREN INSPECTED.

Defective Teeth	9.6
Malnutrition	1.8
Verminous	5.09
Defective Vision	27.2
Uncleanliness	1.6
Poorly Clad	2.8
Suspected Pulmonary Tuberculosis	1.9
Anæmia	1.005
Tonsils and Adenoids	10.9
Otorrhœa	2.4
Skin Diseases	1.005
Heart Disease	0.7
Defective Hearing	1.6
Defective Speech	0.8
Deformities	0.5
Bronchitis	0.2
External Eye Disease	1.07
Rickets	0.2

DENTAL DEFECTS.

There is this year a marked diminution in the number of dental cases referred for treatment. During my examinations I found exactly one stopped tooth, so that it appeared that to advocate treatment was tantamount to advocating extractions.

THE DULL AND BACKWARD FIGURES.

It is the custom here for children to be placed in the standard of their age and not in the standard of their attainments, therefore these figures are arrived at from the opinion of the teachers and not from comparison of the average age of the class and the age of the child.

MENTALLY DEFECTIVES.

There are children waiting to go to schools for the Mentally Defectve, but there appears to be no vacancies for them.

PHYSICALLY DEFECTIVE.

The Education Committee have condemned certain schools as unfit and have passed the plans of the buildings to replace them, but War conditions prevent these being erected. However, since permanent buildings cannot be undertaken, it is worthy of consideration whether more openair instruction in the playground might not be undertaken at small cost by the erection of temporary shelters. Another matter is that many of the physically defective children would benefit by part time instruction, though unable to complete the whole session and others could aftend but only

irregularity, for the Attendance Department desire either regular attendance or non-attendance. I would suggest that a form of irregular attendance on medical certificate from the Clinic is in the interest of the child.

THE SCHOOL FOR CRIPPLED AND DELICATE CHILDREN.

This has been continued at the "Settlement." The Superintendent reports that 30 children on the books made 1,220 attendances. Five children were sent for a week's holiday in the country. This is the only provision and a voluntary one for the education of enfeebled children and is a great deal better than nothing, but the premises are unsuitable. It will be necessary for the Committee to make suitable provision at the earliest possible date.

CLOTHING AND FOOTGEAR.

The few cases where Clothing and Footgear were defective were found to be due to carelessness or neglect rather than destitution.

REASON FOR IMPROVEMENT IN PERCENTAGE OF CASES TREATED.

It will be seen that 65.6 of defective children received treatment and that this percentage compares favourably with that of previous years, viz., 46.6 for 1916, 21.3 for 1915, and is to be largely attributed to the arrangement with the County whereby the County Opthalmic Surgeon treats six cases a week sent him by your Medical Officer. This arrangement took effect on January 30th, 1917. As a result 232 eye cases were remedied in 1917 as against 92 such cases in 1916.

These Tables of Defects are only roughly comparable with Dr. Fraser's tables of 1916, as they are the product of his work and mine, and similarly they will not be comparable

with my figures for 1918.

For example take Adenoids. All children have some Adenomatous tissue in their throats. When this becomes a defect is a matter of opinion, when it should be operated on is again one on which opinions differ, and as the inclusion or exclusion of border line cases is dependant on the individual medical examiner, comparative tables of defects found in different schools have not been included in this report.

THE SCHOOL CLINIC.

Inspection Clinics have been held twice weekly on Monday and Thursday afternoons, from 2 to 5 o'clock.

The system of working the Clinics is the same as in

previous years.

Ears.		
1913	930	2566
1914	898	2237
1915	795	2385
1916	1432	3241
1917	1244	2972

A classification of the diseases affecting the 1244 children who attended the Clinic in 1917 is given in the appended table.

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CASES ATTENDING THE SCHOOL CLINIC.

DISEASE.				No. of Cases.	No, of Attendances.
Contagious Diseases:					
Ringworm Impetigo Scabies	• • •	• • •		55 209 77	166 495 283
Tuberculous Diseases:					
Pre Tubercular Pulmonary Other	• • •	* * *	• • •	35 9 17	298 29 67
Infectious Diseases:					
Sore Throat Other	• • •	• • •	• • •	$\begin{array}{c} 147 \\ 73 \end{array}$	157 91
Nervous Diseases				29	101
Diseases of Circulation				31	126
Diseases of the Eye				177	312
Diseases of the Ear				46	94
Deformities				26	64
Other Skin Diseases				82	149
Miscellaneous					
Debility Bronchitis Verminous Head Other	•••	•••		100 20 45 66	221 62 118 138
Totals	• • •	• • •		1344	2972

A few simple ointments are supplied at the Clinic for the treatment of these infectious conditions, but, as was already suggested, they could be much more effectively dealt with at a daily morning Clinic, and on the arrival of the School Nurse it is hoped to do this.

Twenty cases of Ringworm of the Head were sent for X-Ray treatment to the County School Clinic.

The Clinic is primarily an annexe of the Attendance Department to determine whether absentees are or are not fit to attend school, and the children after examination are told to attend or are excluded from school. If excluded they are seen periodically at the Clinic. Children thought to be ailing are also sent by the teachers and for the same reason, namely, to learn whether they should attend school. Treatment is not attempted except as stated above, but if treatment appears necessary the parents are advised to call in their family doctor, or seek hospital treatment as the case requires. If necessary further following up is done by the Civic Guild to see that the child does receive treatment, and as all children while excluded from School are seen periodically at the Clinic; if they are found not to be receiving treatment, further warning is given to the parent.

INFECTIOUS DISEASES.

An epidemic of Measles occurred during the second week in October, and reached its apparent maximum in December, 470 cases of Measles being notified by the Teachers and Attendance Officers, and 263 notifications of Other Infectious Diseases, making a total of 733. The Infant Departments of the following schools were closed when their attendance had dropped to 50 per cent. on account of Measles:—

Old Road, July 19th to the end of the term.

Hipper St., July 21st ,,
St. Thomas, Dec. 10th ,,
Central, Dec. 7th ,,
Victoria, Dec. 17th ,,

School notifications are of great importance for the control of diseases, especially of those not compulsorily notifiable under the Infectious Disease (Notification) Act, and I hope the members of the Teaching Staffs will continue to bring all these cases to the notice of the School Medical Officer.

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INFECTIOUS DISEASES NOTIFIED BY SCHOOL TEACHERS AND ATTENDANCE OFFICERS.

School.	Measles.	Whooping Cough.	Chicken Pox	Mumps.	Diphtheria.	Scarlet Fever.	Impetigo.	Scabies.	Ringworm.	Total.
Central Brampton St. Helen's St. Thomas' Old Road Derby Road Christ Church Hipper Street Soresby Street Victoria St. Mary's Hasland C.E. Spital Hasland Eyre Street	138 81 72 37 23 20 8 14 28 27 16 4 2	1 22 1 19 13 14 7 1 1 	4 27 11 3 1 5 1 3 2	2 8 4 4 3 1 1 	2 5 1 4 4 	1 8 4 5 3 4	4 3 1 4 3 4 2	2 2 1 4 3 	2 1 4 2 1 	150 155 79 53 53 47 42 40 38 37 20 6 5
Total	470	80	58	31	25	25	21	12	11	733

RE-INSPECTIONS.

Under the scheme which was established some years ago defective children are re-inspected three times in the year. A list of the children for whom no treatment has been provided is sent to the Medical Inspection Sub-Committee of the Civic Guild. The ladies of this Committee follow up these cases to their homes and urge on the parents the need of obtaining suitable treatment. An account of their very useful and meritorious work appears in the Annual Report of the Civic Guild.

